The Veterinary Record

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Announcement

THE NEW ACTING PRINCIPAL AND ACTING DEAN OF THE ROYAL VETERINARY COLLEGE

The Governors of the Royal Veterinary College have now announced that at the meeting of the General Purposes Committee held on July 27th the selection was made of Professor J. B. Buxton to the posts of Acting Principal and Acting Dean of the Royal Veterinary College, as from September 25th, 1936, in succession to Sir Frederick Hobday. Sir Frederick will retain his connection with the College in the capacity of Principal and Dean until the formal opening of the new buildings by the King in June next. He will therefore be in a position to receive the recognition justly due to him on that occasion for his personal efforts.

As confidently predicted in our leader of July 25th, the choice of the present Governors has fallen upon a man within our profession who is eminently qualified to undertake the task that lies ahead of him. This task is essentially the equipment and organisation of the rebuilt College for the specific purpose of training young men and women to undertake the manifold services at the present time demanded of veterinary graduates. We shall have occasion in our coming issue to deal more particularly with Professor Buxton's career. It must be said at once, however, that no man within the profession during recent years has taken a more active interest in the standardisation and organisation of veterinary education: the present curriculum of the R.C.V.S. is largely the outcome of his indefatigable labours. Since he was appointed Professor of Animal Pathology in 1923, there has come into existence under his direction in Cambridge a premier research institution in animal pathology: this institution was manned, be it said to Professor Buxton's credit, at its inception by young veterinarians of his choice, who have since then, under his inspiring lead, proved their worth as research workers. The numerous committees, official and scientific, upon which he has served have given him a remarkable and unrivalled insight into the methods by which our democracy enlists the services of expert workers.

The large experience gained by him in council and in the public life of the profession, added to a highly trained gift for public exposition of a case for the profession, a dignified and urbane personality, long acquired habits of industry and businesslike execution of affairs, and an ingrained faith in the merits of his chosen calling—all combine in an eminent degree to fit him to shoulder the heavy and delicate responsibilities that confront the head of the Royal Veterinary College. Not least important, it must be remembered, is that the occupant of this exalted post, following the tradition which was so greatly enhanced by Sir John M'Fadyean, is expected in large measure to be the spokesman of our profession. It is a cause for no small degree of gratification to us that Professor Buxton has been nurtured to his present stature by the assiduous exercise of his talents in the furtherance of the interests of our N.V.M.A. Indeed, our readers are so familiar with the pre-eminence he has justly gained through his unremitting endeavours on behalf of the "National" as it is now organised that they will acclaim the undoubted wisdom of the Governors in selecting a man of such proved merit to the acting Principalship and, with one accord, wish him long and happy years crowned with glorious success. There lies before him perhaps a sterner task than any in which he has hitherto signally triumphed, faced as he will be in the future by the most keenly critical of all sections of humanity, namely, his classes of students.

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Professor Wooldridge as Vice-Principal

Our readers will be deeply gratified that a most faithful servant of the College, the old and trusted friend and gifted teacher of many generations of veterinary students, Professor George H. Wooldridge, has been appointed Vice-Principal. No more fitting or well-merited selection could have been made for this post. The appointment will give cause, we feel sure, for rejoicing among all past and present students of the College and members of the N.V.M.A., for no one has so thoroughly laid claim to their genuine esteem than Professor Wooldridge has done for long years through his unvarying kindliness and the unswerving devotion with which he has served the College and his profession.

The Veterinary Record

August 15th, 1936.

THE RETIRING PRINCIPAL OF THE ROYAL VETERINARY COLLEGE: HIS CONTRIBUTION TO THE ESTABLISHMENT OF THE REBUILT COLLEGE

THE selection by the Governors of the Royal Veterinary College of a successor to Sir Frederick Hobday marks a stage in the history of the College and also in a remarkable career. It will not, we are certain, by any means mark the close of that career. We sincerely hope that Sir Frederick Hobday will yet be spared many years in full health and vigour to benefit the profession by the application to its service of his unique gifts with his usual indomitable energy and enthusiasm. He may count on the esteem and affection quickened in incomparably large numbers within our profession and among the outside public to provide him with abundant employment and interests to absorb his energies; so that, we can assure him, he has no cause whatever to feel disheartened.

Born in 1870, Sir Frederick Hobday was educated at Burton-on-Trent Grammar School and received his professional diploma from the London College in 1892, the year in which his great predecessor, Sir John M'Fadyean, was appointed Dean of the College. He was the first hospital surgeon of the new Dean, and the abiding impression which his industry and conscientiousness left upon Sir John's mind is revealed in words spoken many years afterwards at a luncheon to which members of the Councils of the N.V.M.A. and R.C.V.S. had been invited by the President, Mr. Male: "He (Sir John M'Fadyean) would say this, however, that Mr. Male was appointed by him to be Hospital Surgeon, and if he were asked to name the man who was the best Hospital Surgeon in his time he would find himself in some difficulty, that difficulty consisting in making a choice between Mr. Male and the present Principal of the Royal Veterinary College, Professor Hobday. Nothing ever seemed to tire them or diminish their enthusiasm for their work, and that, he thought, was the sort of thing that foreshadowed the success with which each had met in his career." He remained on the staff of the London College until 1897 as Professor of Materia Medica and Therapeutics and held charge of the out-patients' clinic, which at that time provided an extensive experience in horse practice. During this time he gained remarkable skill in operative technique and became a pioneer in small-animal practice—a side which had been almost entirely neglected by the veterinary clinician. His work on animal anaesthesia and the exploitation of a number of new surgical operations with the aid of antiseptic technique opened up a field in which large numbers of veterinary surgeons in private practice find this day their main source of income. His reputation was no less considerable in the lecture room, and the lecture notes which he meticulously drafted in his subject remained for long with little amendment a safe *vade-mecum* for the professional examinations. The College regulations prohibiting outside practice by members of its staff and the meagre emoluments of junior professors in those days compelled him to seek more remunerative outlet in private practice, which he acquired in Kensington. This soon grew into one of the largest and most lucrative in London, being one of the first of the extensive small-animal practices. Meanwhile his services were in considerable demand by other members of the profession as an operator and expert consultant; his skill in equine ovariotomy and cryptorchid operations became widely known. In 1910 his name came into prominence in connection with an operation which had prospects of considerable economic success at the time and which had previously been exploited to some degree by workers abroad (Moller in Germany and Williams in America), namely, the operation of ventricle-stripping for the relief of roaring in horses. The high percentage of successes mentioned in his early communications must be credited, no doubt, very largely to his personal skill. His restless spirit found expression in prolific writing upon the subjects of his special skill, both in veterinary periodicals and in a rather considerable output of text-books, some of which have reached a number of editions [*Manual of the Practice of Veterinary Medicine* (Courtenay's), third edition; *Surgical Diseases of the Dog and Cat*, third edition; *Castration (including Cryptorchids and Caponing) and Ovariotomy of Troublesome Mares*, second edition; *Anaesthesia and Narcosis in Animals and Birds*.] He has been editor of *The Veterinary Journal* since 1905.

Soon after the outbreak of the Great War he placed his skill at the disposal of the Army, his reputation among regular officers of the R.A.V.C. already standing very high. He saw service in France and afterwards in Italy. He was first appointed in France to arrange for the disposal of surgical work at one of the field veterinary hospitals and afterwards to instruct veterinary officers attached to units in the method of testing for glanders by the I.D.P. mallein test. He then held charge of the veterinary reception hospital at Abbeville, to

[*Harrods.*

SIR FREDERICK HOBDAY, C.M.G., F.R.C.V.S.
PRINCIPAL AND DEAN, ROYAL VETERINARY COLLEGE
Honorary Veterinary Surgeon to His Majesty The King

which was attached the school of farriery. The hospital, which was a movable one, was selected to accompany the 14th Army Corps to Italy in 1917, and in that country he came into close contact with prominent Italian veterinarians. On demobilisation he returned to his private practice cheerfully to retrieve the loss sustained during his absence and enter with renewed energy into public work of veterinary interest. One of his most cherished ideals had long been the establishment of closer and more cordial relationships between the medical and veterinary professions; one of the most productive fruits of his labours to this end was the formation in conjunction with the late Sir Clifford Allbutt, in 1923, of a Section of Comparative Medicine in the Royal Society of Medicine. He also took a very prominent part in various public humanitarian interests concerned with animal welfare, and in this way his name became familiar to the large body of the British public who are animal lovers. He served on the Council, R.C.V.S., from 1910 until the outbreak of the War and again from 1925 until the present time. He has been examiner in Materia Medica and Therapeutics, 1901-1910, and Surgery, 1914-1923. He was Steel Memorial medallist, R.C.V.S., 1899, and the second recipient of the Victory Medal of the Central Veterinary Society.

With his unrivalled gifts of public appeal, especially to humanitarian interests, and the reputation he had so widely gained among the public in the special spheres of utility which have come to absorb, perhaps most conspicuously in the ordinary public mind after all, the services of qualified veterinarians, it was not surprising that he was selected by the Governors of the Royal Veterinary College to succeed Sir John M'Fadyean on the retirement of the latter in 1927. The College urgently required rebuilding and funds were imperatively needed to begin the work as early as possible. The scheme of rebuilding contemplated originally by Sir John M'Fadyean before his retirement was a somewhat modest one, and after representations had been made to Government, a grant from the Development Fund was sanctioned on a pound for pound basis of a sum up to £35,000. An appeal for the public subscription of £50,000 was made, and by the time of Sir John M'Fadyean's retirement in September, 1927, a sum of £13.000 had been raised by these means. The number of students attending the College at the time was 117. The plight of the College now became a matter for grave public concern. Largely through the propaganda carried out by Principal Hobday himself, advocating the advantages of a veterinary career and the openings which to his mind it offered to women as well as to men, together with the growing demand for the whole-time employment of salaried veterinarians in the public services, the numbers of students entering the College rapidly increased. Concurrently, the inadequacy of the facilities for a proper veterinary training was emphasised in several official quarters, and the national attitude towards the premier veterinary institution of the country became the object of severe castigation in the Lovat Report (1929) upon recruitment for the Colonial Veterinary Service. An authoritative enquiry into the steps necessary to restore the London College to a satisfactory footing was therefore instituted by a Departmental Committee appointed by the Ministry of Agriculture, under the chairmanship of Sir Charles J. Martin, in July, 1928. This committee unhesitatingly confirmed the conclusions of the Lovat Committee, that the deplorable condition to which the College had been reduced both as regards buildings and finance amounted to a national disgrace. The recommendations of this committee, for rebuilding and reorganisation, have been referred to in the leading article published in our issue of July 25th. At the time of the publication of the Martin Report, in 1929, the amount of money collected by voluntary subscription through Sir Frederick Hobday's efforts had increased from £13,000 to £32,000. Conditions, however, now threatened to become desperate, unless strong monetary support from the Government was assured to augment whatever sums could be realised by private subscription. On July 24th, 1930, the Earl of Harewood, who had then been elected to the Board of Governors of the College, called attention in the House of Lords to the recommendations of the Martin Report. He declared that the College had almost reached the stage when the Governors would have to refuse to accept new students. The Government then stated that it was willing to make an offer to give pound for pound for the £30,000 (approximately) already collected, and £70,000 in addition, making £130,000 available in all for rebuilding. It was also stated that when the sum at the disposal of the Governors reached £200,000, the Government would be prepared to make a further grant of £50,000. The Governors, however, expressed their view that they could see no hope of raising by private subscription the additional sum of £70,000 necessary to qualify for the Government grant. In 1931, the subscription list had risen to £39,000, and the Government grant was postponed owing to the financial depression. By February, 1932, the state of affairs had so far improved, however, that the announcement was made that the rebuilding scheme would be launched during the year, and £50,000 or £60,000 was to be spent on the first block (clinic and hospital). Special appeal programmes were issued by Principal Hobday, comprising Flag Days and other methods of

attracting public notice, and the subscription list received a donation from the King. Then, on October 8th, 1932, it was announced that the Appeal Fund had reached the total necessary to claim the Government grant of £150,000. In recognition of his efforts, Principal Hobday received the honour of Knighthood in the New Year's Honours List in 1933. In a statement which he broadcast afterwards to the public (January 8th, 1933) he appealed for further subscriptions to an additional fund of £250,000 which was still necessary to equip the new buildings. Later in the year (July 24th), the Governors announced that the site of the College had been purchased from the Ecclesiastical Commissioners and the proposed additional site to the north of the old College had been acquired, upon which a hospital block was to be erected. We understand that the total amount of money collected to the present time by voluntary subscription amounts to £116,000. The number of students attending the College has now risen to the unprecedentedly high figure of 326, and still larger entries are predicted. The staff has been considerably augmented and their rate of remuneration is higher than it was in 1926. Certain features in the extended staffing of the College, such as the Courtauld Chair of Animal Husbandry must be credited entirely to the personal efforts of Sir Frederick Hobday.

We shall look forward hopefully to recording rapid material progress of this order towards the full equipment and organisation of the Royal Veterinary College to take its rightful place as a model and foremost centre of veterinary education. Progress of this kind must be reckoned as essential to meet the ever-widening demands of a thorough modern training, though, it is needless to say, it can never be regarded as a substitute for a tradition of sound and competent learning or the inspiration conveyed to students by first-class teachers. At this present stage we must recognise that in the provision of the splendid edifice wherein future generations of British veterinary surgeons may be properly guided to undertake the pursuit of their calling, the veterinary profession, agricultural interests, animal lovers, and the British public generally, all owe a lasting debt of gratitude to Sir Frederick Hobday.

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Sir Frederick Hobday: A Personal Tribute from one of Our Oldest Members

As one of the older men in the profession I was sorry to read in some of the recent issues of the *Veterinary Record* that Sir Frederick Hobday was resigning the Principalship of the Royal Veterinary College before the rebuilding had been completed. It must be recognised that when of mature age he gave up a very extensive surgical and consulting practice to go to the College with the object of getting it rebuilt in as complete and up-to-date a manner as possible. He has spent much money and time in visiting the principal veterinary schools in Europe and America for the purpose of gleaning first-hand knowledge of their structure, constitution and teaching so as to have the Royal Veterinary College placed on the highest possible foundation consistent with the amount of space and money allowed for its completion.

So far as obtaining the money has gone, it has been no easy task to undertake this in such a conservative country—which, in spite of its great wealth and its excellent breeds of "economic" animals raised for the feeding and clothing of its people and for exportation to various countries in the world, has contributed less generously to the support of veterinary education and research than any other in the world.

In the earlier part of his professional career Sir Frederick was the first to take up seriously the study and teaching of the diseases and treatment of the "sentimental" animals, such as the cat and dog, so long neglected by the main body of the profession and by the colleges. He also initiated the teaching and value of anaesthesia among the students. This knowledge has become so valuable to the younger generations since the advent of the motor and the decline of the horse that one is constrained to ask, where would they have been without it?

Towards middle life he became the pioneer of the movement for bringing the medical and veterinary professions together and assisted in the formation of the Comparative Medicine Section of the Royal Society of Medicine, he being the first veterinary surgeon to become its president.

He was the first man in the profession to receive a knighthood for *extraordinary* services rendered to the College.

. . . . .

Sir Frederick has struggled very hard to induce people to subscribe to the fund for rebuilding of the College and to endow it with chairs. It was one of the most difficult tasks, but he followed the action of Oliver Twist who took all he could get and then asked for more.

His initiative, courage, perseverance and accomplishment, coupled with the expenditure of energy, time, etc., during the nine years he has held office as Principal of the Royal Veterinary College have justified his existence as such. Before he went there the College was a disgrace to the profession and to the biggest city in the biggest Empire in the world. He has done what no other man in the profession has done: no other man put himself forward to do what Hobday undertook and accomplished—a great task.

Henry Gray.

Presidential Address

"AND THE FUTURE"

By

SIR E. FARQUHAR BUZZARD, B.T., K.C.V.O., LL.D., D.M., F.R.C.P.

Regius Professor of Medicine, University of Oxford

Under the above title, Sir E. Farquhar Buzzard, the President of the British Medical Association, delivered a stimulating Presidential address to the 104th Annual Meeting, held at Oxford recently.

Much of this applies specifically to the medical practitioner, whose problems are similar to but not identical with those of the veterinary practitioner, but there is also much in it which has a very direct bearing upon both human and animal general practice. The more relevant extracts we reprint herewith.

National Health

Those of you who are interested in the problem of raising the standard of national health through the prevention and cure of disease are fortunate enough to have at your disposal a book written by Sir Henry Brackenbury, entitled *Patient and Doctor*, which reviews the history, present position, and prospects of that important relationship in the lucid and masterly manner which the author has led us to expect of him. You may supplement this by reading an address on the "Future of Medical Practice," published in the *Supplement* to the *British Medical Journal* 13 months ago, in which are clearly described by our incomparable Medical Secretary, Dr. Anderson, not only the difficulties besetting us, but the valuable contributions which the Association is offering from time to time towards their solution. The ground-work of your education will be completed if you study the annual reports of the Chief Medical Officer of the Ministry of Health, those of the Medical Research Council, and, lastly, the conclusions arrived at by two or three committees which have suggested various modifications of the medical curriculum in recent years.

Confident that the majority of you are not, and are not likely to become, acquainted with the literature referred to, I venture to summarise in a very general way the impressions it has left on my mind and the thoughts to which it gives rise. In the first place it brings home to me that, as the result of revolutionary changes during the span of a lifetime in the attitude of the public and of the State towards questions of health, many agencies, both voluntary and statutory, have been brought into alliance with the medical profession in its fight against disease, but with a minimum of co-ordination and with little respect to economy of money, time, or personnel.

When I was a medical student 40 years ago such names and expressions as the Ministry of Health, municipal hospitals, and panel practice; ante-natal, infant welfare, and child guidance clinics; tuberculosis dispensaries and orthopaedic centres; almoners and health visitors; X-rays and physical medicine; mental hygiene, psychotherapy, and even the inferiority complex were unknown to our vocabulary. And to what cause is this beautiful enrichment of the English language to be attributed? The answer to that question cannot be disputed, but is, in a sense, threefold. First, the unprecedented growth of scientific medicine during the last 50 years; secondly, the recognition by the State and the general public that the application of this knowledge can contribute materially to the safety, welfare, and happiness of the community; and thirdly, the very just demand that every member of the community, even the rich, should have the right to share in the benefits made available by the progress of knowledge.

Collective Security

It is not surprising that, in the haste to make practical use of new armour and new weapons, the war against disease has been conducted on a wasteful and ill-organised system. It is most satisfactory to learn that the State, represented by the Ministry of Health, the Medical Research Council, and local authorities; the profession, represented by our Association; and the public, represented by enlightened citizens who generously sacrifice much of their time and energy to voluntary organisations, are not only awake to the dangers of independent action, but are displaying an admirable willingness to pool their resources and to co-operate for the common good. If this spirit of collective security is not yet universal throughout the country I can assure you that it is very evident in the city and county of Oxford.

[From what signs are generally discernible, it would seem that the time has not yet arrived when the veterinary profession can regard with such confidence any similar desire "to pool resources for the common good" on the part either of the State Departments, or the enlightened citizens of the public, though in view of its well-known scheme, our National Association has already begun to pave the way to that end.]

Sir Farquhar continues:—

Underlying the whole problem of providing the population of this country, and indeed of any country, with an efficient medical service are the conflicting claims of time and money, and a few words on each of these will not be out of place. It is probably true to say that the time factor is not yet popularly recognised as

the most important ingredient of efficient medical practice, and that every addition to the store of medical knowledge enhances its value. The more possibilities open to the mind of the doctor, the more paths of inquiry he is obliged to pursue, the more evidence there is collected to be weighed, the longer is the time he needs to do justice to his patient. The not uncommon belief that the speed with which a doctor arrives at a diagnosis is an indication of his professional ability rather than of his business capacity cannot be seriously supported, and even if it may be to some extent justified when a case of fully developed disease is placed before him it lacks all foundation when he is confronted with what are known as minor ailments. If the standard of health of the community is to be raised it can only be by the earliest possible detection of slight departures from normal health and by the prompt initiation of measures for their arrest. It is at this stage that recognition of illness is most urgent and fruitful, and it is then, far more than later, that the doctor requires time in order to bring all his knowledge and all his technical resources into action. Both oral and physical examinations of the patient involve expenditure of time, and in most cases the former is the more lengthy as well as the more enlightening piece of research if skilfully pursued.

Time and Money

Any medical service, therefore, which aims at the prevention and early detection of disease, to say nothing of the preservation of health, must provide the doctor with ample time to carry out his work, and, I have no hesitation in adding, the better educated the doctor the more time will he require. The chief flaw in a badly organised service, such as that which has evolved in this country during the last century, is lack of time, and both the general practitioner and the consultant, in order to earn a living wage, are frequently obliged to undertake far more work than they can deal with efficiently in the hours at their disposal. Under the present system it would be necessary to double the number of doctors in order to obtain an adequate service, and such a measure would rapidly lead to their starvation. That, in a word, is the problem before us, and if the community cannot afford to support a 100,000 instead of 50,000 doctors—and you will readily agree that it cannot—every effort should be made to ensure that time and energy, as well as money, are not wasted in any system of service we are engaged on developing.

Fortunately sciences other than that of medicine have not been idle meanwhile, and modern means of communication and of transport not only save valuable time but make possible the establishment of health centres where the personnel and special equipment necessary for skilled diagnosis and treatment are easily accessible to, and capable of serving, large surrounding areas of population.

But every medical man and woman within such an area must belong to the service. The day has passed when any doctor, whether in general or consulting practice, can legitimately pretend to carry on as an isolated and independent unit ready to meet all the requirements of his patients. In his own interests, as well as in those of his patients, he must be part of a team, recognising the responsibilities and enjoying the advantages which team-work alone can provide. And if time and money are to be saved there must be the least possible overlapping of duties, each member of the team having his own specific functions to perform in the general service. For similar reasons it is essential that the health centre should recognise practitioners within its area as an integral part of the scheme, each with a personal and privileged interest in its successful organisation.

There are, indeed, two reasons why general practitioners should become more intimately associated than heretofore with the health centre of the area in which they practise. In the first place, a long experience as a member of the honorary staff of at least five different voluntary hospitals has convinced me that these institutions are all under-staffed, and that in consequence the standard of efficiency is not as high as it should be or as it would be if general practitioners were more frequently asked to participate in the work. In the second place, the general practitioner would undoubtedly benefit if he could devote even two or three hours a week to responsible hospital work, thus keeping in touch with his colleagues in the service and abreast with contemporary increments of knowledge.

[There is no doubt that a certain amount, perhaps even much, of the organisation envisaged under such a scheme as is outlined could be applied to the veterinary services of this country, but obviously radical differences would be necessary. Modifications would have to be made to fit into any scheme those practitioners whose duties are mainly concerned with specialised equine and canine medicine and surgery. To the comparatively independent practitioner who has hitherto been accustomed to regard his own skill and abilities as adequate for nearly every emergency which may arise, it will doubtless come as something of a shock to contemplate an organised country-wide scheme which would draw him into its mesh as a member of a team. Those responsibilities and advantages, outlined by Sir Farquhar, may by some be regarded as inadequate compensation for the relinquishment of their independence and for the sinking of their own individuality. If under the new system the practitioner might have the satisfaction of knowing that when failures occurred any blame or chagrin would be shared by his colleagues,

he would nevertheless be deprived of that sense of personal triumph which follows the successful termination of a difficult case, and of which is born that sense of self-confidence and self-reliance which can be so important a psychological asset.]

Health Centres

Perhaps I should indicate at this stage what I have in mind when alluding to the "health centre" of a district. It is not very easy to define, but I envisage a central board, based, geographically as it were, on the chief hospital, voluntary or municipal as the case may be, but representative of all interests and institutions concerned with the health of the district. Round the table would be seated not only the municipal lions and the voluntary lambs, but, where a medical school is included, delegates of the more academic departments of medicine. The chief duty of such a board would be that of co-ordinating all the preservative, preventive, and curative services within the district, of avoiding overlap and wastage, and of thus assuring the public that its financial contributions to the common cause of health, both voluntary and levied, are used to the best economic advantage.

It will be agreed, I think, that we have the materials ready at hand in most parts of the country for building up such health centres with their medical services, but much ingenuity and yet more goodwill are needed for the process of moulding and cementing their constituent portions. We may go further and agree that such an organisation is the natural development of past and present services and capable of adaptation to modern conditions and requirements, while preserving all that is best of our old institutions and traditions.

[Sir Farquhar outlined the problems of staffing of voluntary and municipal hospitals, indicating that already there was beginning to be a notable change in the increasing numbers of the well-to-do classes who sought and preferred hospital treatment. He suggested that this would gradually lead to a disappearance of the purely honorary position of the staff of the voluntary hospital, and to a system of payment for part-time services.]

He went on to say: Far more obvious and far more serious are the changes which, of recent years, have disturbed and still threaten the character, the scope, and the finance of general practice. Insidiously but steadily has general practice been lopped of many of its branches and, in the absence of any determined attempt to re-define its functions as an integral part of a large health scheme, its future is both uncertain and unattractive. This position has been reached partly, it must be admitted, as the result of the professional apathy, but chiefly in response to the demand of the public, for economic and other reasons, that various services, not entirely limited to the field of public health, should be controlled by local or statutory authorities.

Future of General Practice

On the other hand I fail to see why general practice should not assume a more important rôle in the future of medicine than it has played in the past, and at the same time re-establish some of the personal family doctor relationships, recently imperilled, on secure and useful foundations.

The general practitioner has often been called the backbone of the profession. He should, I suggest, in future be regarded as the finger of the profession, and, not being an osteopath, I assign to the finger far more valuable functions than those allotted to the vertebral column. Fingers are the most sensitive parts of our peripheral anatomy, the most highly trained instruments for detecting irregularities and abnormalities in the objects with which they come in contact, and it is to those fingers of the profession, the general practitioners, that we must look for the discovery of imperfections in our midst. That, in itself, is a task which, as I have already stressed, needs much time as well as skill, and it is only proper that those engaged on it should relinquish a considerable portion of their responsibility for the care of patients who are seriously ill and who will, inevitably, drift more and more to institutions for investigation and treatment. The saving of life has become the job of institutional teamwork; the saving of health and the prevention of illness, in the long run of far greater interest to the welfare of the community, must be initiated by the general practitioner in the home. But it is essential that, if this urgent task is to be performed efficiently, general practitioners should, as part-time officers, help to staff those medical services, preventive and curative, which have been diverted to the control of public health authorities. Otherwise overlapping of duties and waste of time and money are unavoidable, and, still more to be regretted, the personal interest of the general practitioner in the welfare of his flock will be dissipated by the frequent experience of losing touch with its members. It should be the obligation of the health centre, in its capacity of co-ordinator of all services, public as well as private, to make sure that general practitioners are rightfully regarded and employed as priests of preventive medicine.

Health Education

In adumbrating this evolution of general practice I have not been deaf to the popular clamour for education in the means of maintaining the health of the individual on the one hand and in raising the standard of health of the race on the other, and this call will be answered if the public come to look upon the practitioner as the protagonist of health as well as the alleviator

of suffering, and if the practitioner is trained to supply the necessary information and advice. It is of interest, in this connection, to note that the chief recommendations made by those who have recently considered the medical curriculum all indicate a recognition of the part which the practitioner will be expected to play in the future. Emphasis has been laid on the imperative need for a high standard of general education without which the practitioner's influence on the lay mind in matters of health lacks authority. Special prominence is given to the student spending more time than hitherto in acquainting himself with minor ailments, and all teachers of medicine and surgery are exhorted to bring before their students methods of preventing as well as methods of fighting disorders of the mind and body. Medical psychology and psychotherapy have now for the first time been given an assigned place in the curriculum, and, finally, the importance of some knowledge of genetics has not been overlooked. If these recommendations are really implemented we may hope that the general practitioner may retain his position as the family guide, philosopher, and friend, and at the same time, as part of an organised medical service, be able to command for his patients such special advice, skill, and equipment as are required to supplement his own efforts.

Research Centres

You may think it strange that in this place and at this time I have delayed so long any reference to the urgent call for more knowledge, to the paramount claims of medical research. The picture I have painted of possible, perhaps probable, developments in practice formed a necessary background to what I contemplate in regard to this pressing and difficult problem.

I have heard it stated that the level of British contributions to new knowledge in medicine has fallen in recent years and that the great advances in treatment have, in almost every instance, originated abroad. Be this true or not there can be little doubt that men with the flair for advancing knowledge have little encouragement to give adequate time to preliminary training in methods of research or to devote their lives to the prosecution of scientific inquiries. A living wage in these fields of labour is not easily obtainable, and promotion to posts free from financial anxiety is lamentably uncertain even to the most promising candidates. Although this defect has long been recognised, attempts to overcome it have met so far with no complete success. Is it possible that the establishment of organised health centres on the lines I have indicated may help to provide a livelihood for a limited number of men and women well qualified to promote our knowledge of health and disease?

It can hardly be denied that every large health centre, and certainly those embracing medical schools, should include among its activities a department of research. Such a department would need a small number of beds in one of the hospitals, special laboratory accommodation, a director, and assistants. The director and assistants would be whole-time officers, and their energies should not be dissipated in teaching or in carrying on private practice. Such a department would help to raise and maintain the standard of scientific medicine throughout the centre, and its doors would be open to any member of the staff of the centre who had the time and inclination and ability to join in the quest for knowledge. The main field of research in each centre would vary with the choice of the director, and it would be all to the benefit of progress if, for instance, in one place there was a bias in favour of surgery, in another in favour of neurology, and in another in favour of therapeutics.

If this principle is conceded, and to some extent it is already acted upon here and there in an undeveloped way, there still remains the desirability, if not the necessity, of providing at least one school in the country for training men and women the majority of whom would devote their lives to medical research, would not earn their living in practice, and would aspire to the position of the director of a research department in a large centre.

Such a school should have at least three departments representing the three great branches of clinical work, medicine, surgery and gynaecology combined with midwifery, each under the direction of a recognised leader well fitted for the important task of linking observations at the bedside with those made in laboratories. It should be in close touch with physiological, biochemical, anatomical, pathological, pharmacological and radiological institutions, and it should be free from any heavy burden of teaching medical students. In some respects, in its constitution and aims, it would play the part in academic medicine which the staff college plays in the military world; that is to say, in advancing knowledge and in training officers for similar work in other fields. The resemblance is even stronger in that it would be a centre where men desirous of completing their education in scientific medicine could spend a period of time, perhaps two or three years, in pursuing research, before devoting themselves to teaching and consulting practice.

[When one attempts to visualise veterinary research organised on a basis somewhat equivalent to the above, the future of our profession gleams brightly. With the extension and more adequate equipment of at least two of our British veterinary schools at present in active progress, we can compliment ourselves that at least a beginning has been made. We, however, have more than this. Those institutes already established for research into animal diseases,

should soon be in a position to supply a small but steady stream of adequately trained young research workers who will provide a reservoir from which future demands can be met.

It seems legitimate, in passing, to scrutinise the present tendencies of veterinary research a little more carefully. As the result of the unfortunate association between the words "veterinary" and "animal disease" on the one hand; and on the other the error into which those who guide our research destinies appear to have fallen in tacitly assuming that animal disease is mainly bacteriological, parasitological or virological, the whole of our big research guns are trained upon a bacterium, a worm or a virus. We are almost forced to conclude that to those who hold the purse-strings, veterinary research is synonymous with disease research and disease research with bacteriology, etc.

A few hardy spirits may have strayed into biochemical, physiological, nutritional, genetic or other fields, but in so doing they have isolated themselves from many veterinary contacts, and have had to carve niches in these cognate sciences in competition with more intensively trained men who have specialised and established themselves already. Only those who have achieved even a small measure of success know how hard has been the struggle. It is no exaggeration to say that the young veterinary graduate, who is ambitious to specialise and has spent some five years learning much that is to be useless to him later, is under a very severe handicap when he begins his specialist training in one of the allied pure sciences where he meets university graduates who have had every opportunity and encouragement to specialise for one or two years before being awarded their ordinary or honours degrees. The young M.R.C.V.S. is already a lap behind in the race before he starts. Where then lies a solution? To answer this it becomes relevant to determine whether the standard of intelligence and ability possessed by an average class of veterinary students reaches that of an average university B.Sc. class, from which research workers in other sciences are largely drawn. And further whether those *rara aves*, the students with a "flair for research" get encouragement or opportunities similar to those enjoyed by university students. It seems that the answer to the first is "Yes," but to the second "No."

There are undoubtedly men of great ability possessing great research potentialities in our ranks, who are wasted. If their early hesitating steps carry them into bacteriological excursions, doors are opened and facilities are provided; let them, however, but peep over the fence with a longing eye into physiological, pharmaceutical, or nutritional pastures, and they are met with the shout "Keep out," and the fence is heightened. Most depart into practice, Public Health or what not; only isolated individuals get a footing.

It seems that now, when reorganisation is so much in evidence, is the time to rationalise veterinary training for research, by ensuring that adequate facilities shall be provided in other fields than those purely concerned with the investigation, cure and treatment of disease. Developments will cost money, but the money will be well spent.]

Sir Farquhar put in a plea for the greater use of bedside research, both as a means to an end and as a pointer to the lines along which pharmacological, physiological and biochemical investigations might bear rich fruit, and concluded by saying: Rightly or wrongly, then, I envisage great modifications in both medical practice and medical education, the latter being influenced to a great extent by the special and various needs of the former. The large medical schools of the great cities will continue to educate candidates for general practice, modifying their curriculum, however, on the lines I have indicated, in order to equip the practitioner for his particular functions in the general scheme of medical service.

Candidates for consulting and teaching positions will need to supplement their three years of clinical training by post-graduate courses in special departments or by working for two or three years in an institute of research. A limited number of students with the inclination and capacity for a more academic career should have the opportunity of graduating in a school in which the scientific aspects of medicine occupy a prominent position and where they can pursue their post-graduate training in the methods and technique of research as a natural sequence to their undergraduate studies.

All the fundamental requirements for the organisation of health centres and regional medical services throughout the country are in being, with the exception of a medical school largely devoted to the advancement of knowledge and to the training of those who, by ambition and ability, are fitted for a career in clinical research.

The suggestion has come to me from more than one quarter that here in Oxford are to be found the basic needs for such a school and the ideal atmosphere for its expansion. We have all the ancillary scientific departments, admirably equipped and ably directed; we have a large and several smaller hospitals with ample and varied clinical material, and, in the Nuffield Institute, we have a magnificent structure near which, thanks to the munificence and foresight of its generous godfather, is the space for such further buildings as may be required.

An ambitious dream, perhaps, but, if it came true, the future growth and development of the Oxford Medical School would be more than worthy of its great traditions.

Clinical Communications

A CASE IN THE DOG CONFORMING WITH OTTO'S DISEASE IN THE HUMAN

ALEX. DOBIE, M.R.C.V.S.
BIRKENHEAD

Subject.—Eight-months-old bull terrier dog.

History.—The owner had noticed that, from the age of two months, the animal was unable to assume the recumbent posture with comfort, had difficulty in rising and that occasionally a shuffling movement was to be noted when walking.

Examination.—When examined (six months after commencement of the abnormality), first one hind foot and then the other would be raised for a few seconds from the ground. No defect in any joint could be detected. X-ray examination was resorted to with the result shown in the accompanying radiograph of the pelvis and hips.

The radiologist's report was as follows: "No bone change is shown in the head or neck or upper half of the shaft of either of the femora.

"The pelvic surface of the acetabulum on each side, however, shows a plastering of new bone (more marked on the left side). This would conform to the type of arthritis seen in humans known as *Otto's disease*. There is, however, no diminution of the joint space and no deepening of the acetabulum such as is usually seen. It is interesting to find this condition in an animal."

TREATMENT OF A CORNEAL ULCER

A. P. HAMILTON, M.R.C.V.S.
DUMFERMLINE

Subject.—Pekingese bitch, six years old.

History.—The animal had a history of chronic conjunctivitis which had apparently become much worse in the left eye.

Examination.—An examination showed a shallow corneal ulcer in the left eye about "two o'clock" and at the radius of the pupil from the centre of the eye.

Four days later, a second examination was made when the owners reported great difficulty in inserting the drops (2 per cent. Protargol solution) as the subject resented the treatment. The eye was much worse, the ulcer being deeper with pannus extending from the sclera, while the whole cornea was very opaque and showing a tendency to bulge. The floor of the anterior chamber showed a collection of pale yellow-coloured material, and the whole eye was obviously very painful, the lids only being opened occasionally. The owners were informed that the ulcer had penetrated through the cornea and that general inflammation of the eyeball would probably take place with the likelihood of the whole globe having to be removed. They were informed that an attempt would be made to save the eye.

Operation.—The subject was removed to the surgery and given gr. one-twelfth heroin hyd. subcutaneously and then, fifteen minutes later, when in a drowsy state, was anaesthetised with chloroform, using an open mask. The conjunctiva was flushed with warm boric solution. An incision was made by means of a Von Graefe's knife from "six o'clock" at the junction of the cornea and sclera through the cornea into the ulcer. There was an immediate evacuation of fluid but not of the pale yellow material at the bottom of the chamber; this proved to be a coagulum. Fine dissecting forceps were inserted through the incision and the coagulum grasped, but it did not come away in one piece. It had to be picked out by several insertions of the forceps, and even then a small quantity remained which could not be removed. A fine hypodermic stilette was brought to red heat and the edges of the ulcer cauterised. The conjunctiva was again flushed out with boric solution and the animal taken home in a slightly narcotised state.

Course.—An examination was made next day, when the eye did not present a very pleasing appearance, but the vessels in the pannus had contracted noticeably. The ulcer was slightly shallower, but the fluid in the anterior chamber rather dull and the corneal opacity denser. However, it appeared that pain was not so acute. Treatment was commenced by dropping

phenoline eye drops into the eye four times a day. Progress was slow, but in a week the ulcer had become practically obliterated and pain had subsided, the eyelids being kept open and light tolerated. The opacity in the cornea was less dense but the fluid in the anterior chamber still dull. A week later, the opacity was confined only to a slight area where the ulcer had been, and a thin white line where the incision had been made. To-day (four weeks later) these conditions still exist, with the anterior chamber slightly opaque. Sight in the eye appears to be poor, but not totally absent. The eye is now non-painful and the conjunctivitis has cleared up.

Previous experience with other penetrating ulcers of the cornea and treatment had led me to extirpate the eyeball because ophthalmia had ensued. As this was my first attempt at treating a penetrating corneal ulcer by this method, I am quite pleased with the result.

STERILISING THE SYRINGE

"About a century has elapsed since the introduction of the hypodermic syringe, and we are still concerned with the perfection of methods for rendering these instruments sterile before use," writes "Onlooker" in the *Pharmaceutical Journal*. "Injection treatment is now very largely practised in many departments of medicine and much care is given to the preparation and sterilisation of solutions for this mode of use. One fact which is confirmed by the data presented by Coulthard and Sykes [in a paper published in the same issue of the journal] is the impossibility of sterilising a syringe merely by immersing it in alcohol for a few minutes. Yet how often do we find that the only precaution taken is to store the syringe in spirit or alternatively to draw some alcohol into the barrel and expel it two or three times before making an injection. Such a method may remove contamination from all but sporing organisms, and the infrequency with which infection occurring at the site of an injection is encountered leads one to imagine that in practice the method usually is satisfactory. No less important is the possible deleterious effect on the drug to be injected of any of the sterilising fluid which may be left in the syringe, and I imagine that alcohol alone, and still more alkali or acid would be liable to lessen the activity of many hypodermic solutions. Moreover, it is pertinent to ask what is the effect of such residual fluids on the tissues of the patient. Are they in any way responsible for the local tenderness and swelling sometimes seen after an injection? What is badly needed is a method of rapidly sterilising a syringe and needle before use which does not entail the necessity of rinsing in sterile distilled water or carbolised saline solution. In hospital work the difficulty does not arise because of the facilities for heat sterilisation, which is undoubtedly the only satisfactory method. In private practice the need is for simplicity as well as for a method that is 100 per cent. effective."

Abstract

[Equine Encephalo-myelitis. Cross-immunity in Horses between Western and Eastern Strains of Virus. Records, E. and Vawter, L. R. (1935.) *J. Amer. vet. med. Ass.* **86.** 773.]

The results of a remarkably well-controlled series of experiments made on horses by Shahan and Giltner (1935) [*see* abstract in *Vet. Rec.* (1936.) **48.** 744] brought strong support to the earlier observations made in guinea-pig tests that there are two immunologically different types of virus of equine encephalo-myelitis (American), the so-called "eastern" and "western." They found that three horses, proved immune to an intracerebral inoculation of western virus, when subsequently inoculated intracerebrally with eastern virus developed typical encephalo-myelitis and were destroyed *in extremis*. With one exception 18 "eastern" immunes inoculated intracerebrally with "western" virus developed typical encephalo-myelitis, nine being killed *in extremis* and the other eight making only partial or delayed recovery.

The present authors have already published a paper (in *J. Amer. vet. med. Ass.* (1934.) **85.** 89) on this same subject (*see* abstract in *Vet. Rec.* (1935.) **47.** 164). They have extended their observations since then and now state that they have "conducted cross-immunity tests on eleven horses which were *presumably immune* (the italics are the abstractor's) to western virus either as a result of deliberate immunisation or survivors to the experimentally induced disease. Eight of these eleven horses were also resistant to the eastern type of encephalo-myelitis virus"—and further that "horse 9663 which recovered from a severe attack of encephalo-myelitis induced by intranasal instillation of Delaware virus (an eastern type) was subsequently resistant to intracranial injection of virulent western virus." Although they still agree that "serum-protection and cross-immunity tests conducted with guinea-pigs alone would imply that the eastern and western strains could be placed in separate immunological groups," they reiterate their statement made previously that "it now appears, from cross-immunity tests on horses using both established stock strains and recently recovered strains with limited foreign-host passage, that the differences between the western and eastern types of virus may be only different degrees of virulence rather than specific immunologic dissimilarity."

[It is not possible to accept Records' and Vawter's results as final in view of the lack of adequate controls. It is difficult to see also how their results could be interpreted, as they suggest, on the basis of a difference of

virulence between the strains, *e.g.*, it is generally recognised that eastern strains are more virulent than western strains, yet in Records' and Vawter's experiments horses "presumably immune" to western strains of virus apparently possessed some degree of resistance to eastern strains of virus. Reference has already been made in a previous abstract (*loc. cit. Vet. Rec.* **47.** 164) to the observations of Meyer, Wood. Haring and Howitt (1934.) [in *Proc. Soc. exp. Biol., N.Y.* **32.** 56] who reported that they had found an eastern strain of virus exhibited a greater virulence and apparently broke the immunity established to a western strain; on the other hand, the eastern virus apparently protected against the western virus. Reference should also be made to the previous abstract for a brief discussion of some aspects of the problem.]

Records and Vawter report an interesting observation on the recovery of virus from the nasal washings, taken at the 72nd and 96th hour, of an intracerebrally-inoculated horse. Virus was demonstrated in the blood of this horse from the 48th to the 120th hour.

I. A. G.

THE TERMS "STERILE," "STERILISE" AND "STERILISATION"

In a communication from the Food and Drug Administration of the U.S. Department of Agriculture, the Council on Pharmacy and Chemistry of the American Medical Association was asked to express an advisory opinion as to the use of the terms "sterile," "sterilise" and "sterilisation," especially when it appears on the labels of agents used "for sterilisation of the skin." The Council adopted the following statement and authorised its transmission to the Food and Drug Administration:—

> The Council on Pharmacy and Chemistry has formally gone on record as disapproving of the use of the terms "sterile," "sterilise" and "sterilisation" in a bacteriologic sense other than in their correct scientific significance; *i.e.*, meaning the absence or destruction of all micro-organisms. These terms are not relative and to permit their use in a relative sense not only is incorrect but opens the way to abuse and misunderstanding. It is questionable that there are any chemical agents tolerated by the skin which will produce sterility, although there are some which will reduce the bacterial flora of the skin to such an extent that they may properly be described as disinfecting agents. For such agents there is no objection to the use of the terms "disinfecting," "bactericidal" and "bacteriostatic."

The Committee on foods decided that

> The terms "sterile," "sterilised" and "sterilisation" should be used in food advertising in their correct scientific significance only. Foods processed to be free of pathogenic organisms or to keep sound and wholesome were not necessarily sterile, *i.e.*, free from viable micro-organisms.—*Pharmaceutical Journal.*

Review

[**Variations and Diseases of the Teeth of Animals.** By Sir Frank Colyer, K.B.E., LL.D., F.R.C.S. (London: John Bale, Sons and Danielsson, Ltd.) (1936.) pp. 750 × viii. figs. 1,007. £2 2s. 0d. net.]

To say that this is a stupendous piece of work that will be a lasting monument to the enthusiasm and industry of the author sounds patronising, but is not meant to be so. It is meant to indicate a real feeling of admiration. The author's previous publications have been notable contributions to the literature on dental abnormalities; but here he has produced a volume that must stand for a very long time as *the* book of reference for subsequent investigators. Collections in European and American museums have been subjected to inspection with a thoroughness that probably cannot be better indicated than by calling attention to the fact that the vast majority of the thousand figures with which the book is illustrated are from photographs of actual specimens specially chosen because they demonstrate particular conditions.

The subject matter deals with variations in the number and position of teeth, abnormal eruption, injuries to the jaw and the teeth, overgrowth and defective development, diseases and odontomes. The field being so comprehensive, an adequate review, within reasonable space, is impossible; and all the more so since so great a proportion of the text is concerned with the description of individual specimens.

The enormous collection of facts contained within the covers of this book will naturally appeal most strongly to the specialist in dental science; but there is much that is of interest to the veterinary scientist and practitioner. Variations in the number and position of the teeth of domestic animals are of moment in daily practice, and their aetiology is generally regarded as obscure. The author's suggestions of causation may possibly be held as inadequate to explain all conditions encountered: they are nevertheless valuable as suggestions. For example, he says:—

> "There is, if we may use the term, an 'inherent tendency' to variation, and this tendency is accentuated by altered environment such as the change from the wild state to the captive state. In other words, the development of abnormalities in position of the teeth, other than those traceable to accidental causes such as injury, sepsis, etc., is due to the universal tendency of living things to vary. This tendency may be held in restraint or remain in abeyance, or it may be quickened into greater activity by altered environment."

The contention that this explanation is too easy would be readily understood.

The author's suggestion of the cause of "shear-mouth"—which he thinks would be more appropriately called "shear-bite"—may also, by some, be regarded as too facile and unsupported by evidence. He thinks that some pathological condition of the affected side may have produced tenderness and so have led the animal to refuse to use the teeth on that side.

Another form of abnormal attrition of interest to the veterinary practitioner is that which results in cup-like depressions of the cheek-teeth of the horse.

> "The abnormal attrition of teeth in the horse seems to suggest some inequality in the density of the tooth structure, and is a question worthy of full investigation. That the maxillary teeth should be so much more liable to destruction that the mandibular teeth may, in some measure, be accounted for by the general arrangement of the tissues in the maxillary teeth and, in some measure, to the fact that the maxilla is the fixed point or mortar—the mandibular tooth acting as the pestle."

A suggestion that might well be pursued with profit.

The reader will find many similar statements that will arrest his attention and lead to the realisation that dental anatomy and pathology constitute an important and fascinating field of veterinary science not yet fully explored.

INFLAMMABILITY OF OIL OF WINTERGREEN

At an inquest on a Carshalton woman who died in hospital from burns, the husband said that, after a brief absence from the house, he returned to find his wife burning in the garden. He thought she had been rubbing herself with some oil of wintergreen, and had then struck a match to light the gas stove, and set herself on fire. The Coroner's officer said he had made tests with oil of wintergreen, and found that while it would not burn if poured on a stove, it blazed furiously when placed on clothing. Dr. W. A. Robson, who had attended the deceased woman when she was in the hospital, said he was surprised to find that oil of wintergreen was inflammable. He had made inquiries and performed tests, and found that the fumes from the oil as it warmed after being applied to the body were highly inflammable. He could understand the woman catching fire by being near a gas stove. The Coroner, Dr. W. J. Lord, said that in many years' practice as a doctor he had prescribed the oil scores of times, and used it himself. He did not know before that it was inflammable, and he thought the public should be made aware of the fact.

Report

SOUTHERN RHODESIA VETERINARY DEPARTMENT, 1935

Once more the work of the department has been carried on in the midst of very real difficulties. Drought and locusts were responsible for such depletion of pastures in some districts that a mortality as high as 20 per cent. is reported amongst European-owned stock. Curiously enough, the loss among native-owned stock, in the same areas, was much lower. Such is by no means usual. The term "European owned" is usually synonymous with graded stock. It is well known that the more advanced the stage of improvement amongst stock, the greater is the care which must be exercised in regard to them. The indigenous beast will often manage to exist where good animals will surely die. It would be interesting to know whether a lack of provision of suitable supplementary food stuffs is concerned with the result mentioned. Foot-and-mouth disease again added to the problems of the staff, but it was tackled in such a manner that, by the end of June, the last outbreak appeared to have been suppressed.

The situation, as regards disease in general, is good, but has been adversely affected in one respect. In 1934, an Act was promulgated whereby the compulsory dipping of stock was relaxed during certain seasons or under specific conditions. In the majority of districts, this relaxation has resulted in an increase in the tick population and a rise in the mortality from tick-borne diseases. Heartwater, piroplasmosis, and anaplasmosis, have all been responsible for greater losses. No general outbreaks of tuberculosis have been reported, but cases have been recognised in the abattoirs. Cutaneous myiasis (screw worm) has appeared in all districts and again the suspension of dipping is implicated. Contagious abortion is not a scheduled disease and may, therefore, rarely be reported. It does not appear to be of great economic importance. The neurotic method of vaccination against horse-sickness has proved successful in controlling this disease. Internal parasites cause heavy mortality amongst sheep whose owners refrain from treatment.

A total of 59,945 head of cattle (2,084 veal) were slaughtered for export in the chilled or frozen state. This, together with 883,759 lb. of offal, is gradually becoming a highly important trade. The whole of the export meat is inspected by members of the staff and the details of carcases condemned demonstrate the general healthiness of the stock submitted.

(*Continued at foot of col.* 1, *page* 1002.)

N.V.M.A. Divisional Report

LANCASHIRE VETERINARY ASSOCIATION*

CLINICAL DISCUSSION AT MANCHESTER

A general meeting of the Lancashire Veterinary Association was held at the Grand Hotel, Aytoun Street, Manchester, on the afternoon of May 28th, 1936.

The chair was occupied by the President, Mr. C. F. Shawcross, M.R.C.V.S., other members present being Messrs. G. C. Webster, W. Woods, E. H. Curbishley, P. T. Lindsay, H. G. Hewetson, H. R. Hewetson, E. J. Burndred, R. P. Holmes, A. J. Wright, J. C. Baird, A. B. Mattinson, P. A. F. O'Neill, G. Mayall, H. D. Heggarty, R. W. Bett, J. Holroyd, A. L. Mullen and Miss Ray Datnow. Mr. J. F. C. Ward was present as a visitor.

Apologies for unavoidable absence were received from Messrs. H. T. Matthews, A. B. Kerr, E. A. Comer, W. Fowle, G. O. Davies and G. H. Wright.

The minutes of the previous meeting, having been published in the *Veterinary Record*, were taken as read.

Obituary.—The President, Mr. C. F. Shawcross, made reference to "the sad loss the profession as a whole and this Division in particular has suffered by the lamented death of so outstanding and devoted a friend and fellow member as the late Mr. A. W. Noel Pillers." "We have been deeply shaken by it," continued the President—"so much so that I feel that it will be entirely beyond us to get up and say a good deal that might be and that ought to be said concerning him."

Mr. Matthews' Appointment.—"Time, alas, cannot be stayed," proceeded Mr. Shawcross, in commenting upon the appointment of Mr. Pillers' successor, "and now we find that Mr. H. T. Matthews has been appointed to the office of Chief Veterinary Officer of the City of Liverpool. I wish to propose that the congratulations of this Division be tendered to him upon his election to so important an office together with our very best wishes for a long and successful tenure. I am very glad that the mantle of our departed friend has fallen upon his shoulders, rather than those of a stranger: he will at least wear it in remembrance and emulation of his predecessor."

This proposal received unanimous approval and the Hon. Secretary was instructed to convey these sentiments to Mr. H. T. Matthews.

The members, then upstanding, paid silent and sympathetic tribute to the honoured memory of Mr. Pillers. Attention was drawn to the illness of two members of the Association—Messrs. J. Urmson, of Bolton, and A. L. Bragg, of Tarporley, the latter owing to an accident. It was unanimously proposed that letters of sympathy be sent to these members, together with expressions of the hope of their fellow members for their quick recovery.

Royal Sanitary Institute Congress.—On the proposition of Mr. G. Mayall, seconded by Mr. G. C. Webster, it was agreed that the fee of the official delegate of the Lancashire Division to the Royal Sanitary Congress at Southport in July be paid.

Nominations for Membership.—Mr. E. H. Curbishley nominated Mr. J. Cubby, Alderley Edge; the President, Mr. Colin Jones, of Northwich, and the Hon. Secretary, Mr. J. W. Wilson, of Preston, for membership of the Association.

Council Report

A Council Meeting was held at the Grand Hotel, Manchester, on March 20th, 1936, when the President, Mr. C. F. Shawcross, occupied the chair and other members present were Messrs. J. Spruell, R. C. Locke, G. C. Webster, J. Holroyd, A. J. Wright, E. H. Curbishley, H. R. Hewetson, G. Mayall, G. H. Locke, F. Hopkin, and the Hon. Secretary. An apology for absence was received from Mr. A. B. Mattinson.

Arising out the minutes, it was resolved that the Royal Sanitary Institute fee be paid in connection with the appointment of an official representative.

It was resolved to recommend:—

(1) That the proposed committee to collect evidence relating to acts of unprofessional conduct brought to the notice of the Association should be composed of members excepting those who are at the time members of the R.C.V.S. Council;

(2) that the duties of the committee should be those outlined in the original motion;

(3) that the sum of £50 be voted from the Association funds and earmarked for the use of the committee when required;

(4) that the committee be referred to as the Ethical Committee;

(5) that the following scale of fees be adopted as a minimum *per capita* charge for tuberculin testing: 5s. for testing any number of animals up to 20; 3s. 6d. for the next 20; 2s. 6d. for each animal in addition. No mileage fee to be charged.

Arrangements for the programme for the year were made.

It was resolved to recommend that a social evening be promoted by the Association towards the end of the year.

On the proposition of Mr. G. Mayall, seconded by Mr. A. J. Wright it was unanimously agreed

*Received for publication July 20th.

The work of the department, carried out by a professional staff of nine officers, assisted by sixty-seven stock inspectors, and supervised by Mr. G. C. Hooper Sharpe, has, in spite of the difficulties mentioned, been carried out in a commendable manner and the report is a record of advancing effort.

J. S.

that the proposals of Council concerning the Ethical Committee be adopted.

A resolution proposing that that portion of the report dealing with fees for tuberculin testing be referred back to Council, was carried unanimously.

On the proposal of Mr. G. Mayall seconded by Mr. H. R. Hewetson, the Council Report, with the exception of that section dealing with fees for tuberculin testing, was unanimously adopted.

The Hon. Secretary then outlined the arrangements for the year's programme.

Clinical Discussion

The President then called upon the members to take part in an open and general discussion of interesting cases and clinical problems with which they had met recently in the course of their practice.

Mr. A. J. Wright (Macclesfield) opened the discussion by stating that quite recently he had been quite puzzled by the death of all the calves (pedigree Guernsey) on a certain farm, and that any help given to him by members would be most welcome. Mr. Wright described the case as follows:—

Until about six weeks ago calves had been reared successfully; since then, however, five calves had died, all being between three weeks and one month old. The calves were fed from a bucket twice daily with half a gallon of milk from the remainder of the Guernsey herd and all did well. Some 24 hours before death mild symptoms of dullness, inappetence and change of faecal colour (lightening) appeared. Death rapidly supervened in 12 to 24 hours following the onset of the symptoms. An autopsy revealed an enlarged, pale liver in which pathological changes of a degenerative nature had taken place. All other organs were apparently normal. A report received from a pathological laboratory indicated that death was due to degeneration of the liver, probably of toxic origin as a result of feeding. A peculiar point was that a bull calf about the same age suckling a cow fed on the same ration as the other cows, had done remarkably well.

The cows were fed on a ration of beet pulp, hay, dairy nuts, high protein meal, flaked maize and molassine meal. This ration had been used for several years except for this year, in which the beet pulp had been increased. Was it possible that the beet pulp could produce toxins which were transmitted through the milk to the calves?

A prolonged discussion, in which the majority of members present joined, then took place.

Mr. G. Mayall (Bolton) demonstrated a series of specimens:—

(1) *Eristalis tenax* (the Drove Fly rat-tailed larva). Mr. Mayall drew attention to the fact that cases had been recorded of human infestation with the rat-tailed larva of the Drove fly, symptoms of myiasis being evident. Decaying peaches and drinking water contaminated with kitchen refuse were among the reported sources of infection in these cases. In the case of the specimen shown a pig had eaten a rotten apple and shortly afterwards began passing larvae in large numbers.

(2) *Menopon.* The feather louse deposits its eggs singly or in large numbers at the base of the feathers in poultry—chiefly on the legs, base of the wings and neck. Eggs hatch in 10 to 20 days depending on prevailing temperature and humidity. In a few months 120,000 lice may be produced by a pair. In freedom the lice live only five to six days. Nicotine powder or sodium fluoride are lice destroyers.

(3) *Liver of Dog* showing lesions of tuberculosis.

(4) Lesions of bacillary white diarrhoea in a chick.

(5) Mr. Mayall demonstrated a number of other specimens and recorded an interesting case of constriction of the base of the tongue in a terrier by string.

Mr. H. Raynor Hewetson (Southport) presented a smooth-haired fox terrier nearly three years old, which he invited the members present to examine, inviting their opinions on the condition shown. Mr. Hewetson said that the dog had been under his care for nine months without substantial result, and the commendable patience of the owner deserved reward. If the members present could give any helpful advice, the benefit would not be confined to the owner, the dog, or Mr. Hewetson himself, but would be to the good of the profession. There was always a danger of cases where results were slow in coming, passing into the clutches of the quacks, so specious in promise, for this change could easily be made at the time when resolution was about to occur so that the results appeared brilliant, and the careful preliminary treatment useless.

Mr. Hewetson went on to say that he first attended the dog on September 2nd last year. The symptoms at first suggested multiple interdigital cysts with many comedos in the soles and webs of all four feet. This appearance slowly changed to one of swollen and spongy interdigital spaces in which the skin was shiny, occasionally bluish and intermittently oozed or discharged pus. There was an apparent approach to recovery from October 9th to December 11th, on which date the swollen spongy condition recurred, mostly in the fore feet, and had persisted ever since.

There were periods of comparative activity interspersed with others of quiescence. During the whole period local treatment had been carried on—opening, draining, curetting, expressing comedos and dressing with various antiseptics, absorbents and astringents. The local applications used had been, in order, eusol,

zinc and salicylic ointment (Lassar's Paste), iodine, eusol, mercurochrome 10 per cent., T.C.P., collosol iodine oil, tr. ferri perchlor, silver nitrate and back to iodine. General treatment, similarly, had been parathyroid and calcium lactate, stannoxyl, and arsenic in the form of "Spirocid" (Bayer) orally, and davenil, collosol manganese, "Aricyl" and Yatren E. 104 Vaccine (Bayer) hypodermically and intramuscularly.

He disliked having to admit defeat in such a young dog and hoped the discussion would provide a diagnosis combined with a treatment which would be effective.

This case was discussed at some length, a variety of agents being suggested by the members entering into the discussion.

Any Other Business.—Under this heading reference was made to the association of Mr. B. Heaton, of Manchester, with the Lancashire Division during the past and his work in connection with the reporting of meetings in recent years. Departmental changes having taken place in the office to which he was attached in Manchester, it would not be possible for him to attend future meetings. It was with much regret that Mr. Heaton intimated his inability to carry out future work on behalf of the Association.

On the proposal of Mr. J. Holroyd, seconded by Major Mattinson, it was unanimously agreed that a letter of appreciation should be sent to Mr. Heaton and that a gift should be made by the Association as a token of appreciation of his efforts in the past.

A vote of thanks to those participating in the clinical discussion was proposed by Mr. J. Holroyd, seconded by Mr. G. C. Webster and unanimously carried.

A. L. Mullen, *Hon. Secretary.*

ANTHRAX: DELAY IN REPORTING SUSPECTED CASES

In the quarterly report to the Essex Diseases of Animals Committee, the Chief Veterinary Officer (Mr. F. W. Medlock), referring to one case of anthrax, said there was considerable unnecessary delay in reporting the suspected disease to the local authority, and this hindered the making of a correct diagnosis. It was essential to make the diagnosis within twelve hours. In some cases farmers found an animal dead in the morning and immediately cut its throat, and then found it had anthrax. In every case an animal found dead under such circumstances should be treated as a suspected case of anthrax.

With regard to sheep scab he was pleased to report that there were now no sheep under detention in the county.

The Chairman, commenting on the Chief Veterinary Officer's report, said that the work seemed to be proceeding very well. He hoped that when they got the full team of veterinary officers they would improve on what had already been done.

In Parliament

Prior to the Summer Recess, the following questions and answers were recorded in the House of Commons:—

Veterinary Service

Sir R. Glyn asked the Minister of Agriculture (1) when the last survey of veterinary services in England and Wales was made; and whether he is satisfied that there is an adequate number of veterinary surgeons established throughout the country qualified to assist breeders of livestock, bearing in mind that many of these are small occupiers unable to afford to pay a high fee; (2) whether he will consider the appointment of a committee to ascertain whether veterinary services could be made available to agriculturalists by means of a scheme similar to that of national health insurance and panel doctors, so that for a fixed contribution farmers and smallholders could obtain assistance of a qualified veterinary surgeon at uniform rates?

Mr. Elliot: No formal inquiry of the kind mentioned by my hon. and gallant Friend has, so far as I am aware, taken place; and there is no evidence of a general desire for a scheme for an assisted veterinary service on the lines suggested. The Ministry is able to keep in touch with the position and it does not appear that there is any serious shortage in the number of veterinary practitioners; while I am informed that the number of students at the veterinary schools is at present increasing. In the circumstances I feel that no advantage is likely to be served by appointing a committee as suggested by my hon. and gallant Friend.

. . . . .

Veterinary Surgeons (Fees)

In reply to a question on the subject the Minister of Agriculture stated that he had no information as to the average fees charged by veterinary surgeons in private practice, but he was advised that fees vary from district to district, and also with the nature of the case.

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Accredited Milk Licences

Mr. Assheton asked the Minister of Health whether the special inquiries he promised to make in connection with accredited milk licences in certain counties have been completed; and whether he is now in a position to give any further information?

Sir K. Wood: No, Sir. I am still in communication with the county councils of Lancashire and the West Riding of Yorkshire and will arrange for one of my officers to visit Cheshire as soon as practicable.

Mr. Assheton: Does the right hon. Gentleman appreciate the serious injustice that results in those counties where the authorities are more strict than they need be in this respect?

Sir K. Wood: I have received a deputation on this matter from the localities concerned.

GRASS DISEASE IN KINTYRE

Alarm has been caused among farmers and horse-breeders in Kintyre by an outbreak of grass sickness on a farm in the Laggan district, just outside Campbeltown. Two valuable young horses have been attacked by the disease, and one of them has been destroyed on the instructions of Mr. N. Lewis, M.R.C.V.S., while the other is under treatment. This is the first outbreak of grass sickness in Kintyre. The matter has been reported to the Animals Diseases Research Association.

Notes and News

The Editor will be glad to receive items of professional interest for inclusion in these columns.

Diary of Events

August 21st.—Entries for Jubilee Memorial Bursary Examination.

August 24th.—Meeting of the Editorial Committee, N.V.M.A., at 2, Verulam Buildings, Gray's Inn, W.C.1, 4 p.m.

Sept. 14th-18th.—N.V.M.A. Annual Congress, Scarborough.

Sept. 21st, 22nd.—Jubilee Memorial Bursary Examination.

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ROYAL VETERINARY COLLEGE APPOINTMENTS

As announced at the commencement of this issue, Professor J. Basil Buxton, M.A., F.R.C.V.S., D.V.H., Professor of Animal Pathology, University of Cambridge, and Director of the Institute of Animal Pathology and of the University Field Laboratories, Cambridge, has been appointed by the Governors of the Royal Veterinary College as Acting Principal and Acting Dean of the College as from September 25th, 1936, and to succeed Sir Frederick Hobday, C.M.G., F.R.C.V.S., F.R.S.E., as Principal and Dean on the latter's retirement. Sir Frederick's retirement will not take place until the opening of the main block of the new College buildings. Professor George H. Wooldridge, F.R.C.V.S., M.R.I.A., Professor of Medicine at the College, has been appointed Vice-Principal.

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PERSONAL

Accident to Mr. Clement Elphick.—We learn with much regret that Mr. Clement Elphick, M.R.C.V.S., Newcastle-on-Tyne, whilst investigating an outbreak of notifiable disease on behalf of the Ministry of Agriculture and Fisheries, in an abattoir in the city, sustained an injury to his head which caused what at the time was considered to be a slight concussion. Unfortunately, more serious symptoms have now developed and Mr. Elphick has been constrained by his medical adviser to refrain from all work for some little time. Mr. H. S. Elphick and Miss Clay, M.R.C.V.S., will carry on the practice meanwhile.

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Appointment.—Mr. Frederick William Priestley, M.R.C.V.S., DIP. BACT. (LOND.), formerly of the Public Health Department, Manchester, has received appointment as Research Assistant to the Agricultural Research Council, and is temporarily stationed at the South-Eastern Agricultural College, Wye, Kent.

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Testimonial to Family of the Late Mr. Tom Carroll, M.R.C.V.S.—We commend to the sympathetic consideration of our readers an appeal, recently received from Cavan, which states: "You are already aware of the tragic circumstances connected with the death of the late Mr. Tom Carroll, V.S. He was the sole support of a young and helpless family. To provide for the everyday requirements of a young family makes such demands on a father's income, that no complete or adequate provision can be made for the sad and unexpected event of death. To place the bereaved family of the late Mr. Carroll in a position to provide for themselves in the future, and to adapt themselves to their changed circumstances, is the object of this appeal.

"The Committee in charge feel confident that they can depend on the practical sympathy of the numerous friends and well wishers of the late Mr. Carroll and his family to further this deserving object.

"Subscriptions will be gratefully received and acknowledged by the Hon. Treasurers or by any member of the Committee: (Rev.) Patrick Gaffney, B.A., St. Patrick's College, Cavan, Chairman; Andrew McCarren, Senior, and Michael Sheridan, T.D., Hon. Treasurers; Mary Brady, Chairman U.D.C., Cavan, and J. Gilheaney, N.T., Cavan, Hon. Secretaries; J. Beatty, Keadue, Cavan; Joseph Kiernan, Aughavains, Gowna, and Henry J. O'Reilly, Gowna."

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Tributes to Sir Arnold Theiler.—The following tributes to the late Sir Arnold Theiler are reproduced from *The Times*:—

Professor Sir Frederick Hobday, Principal and Dean of the Royal Veterinary College, writes:—

"We were proud when Sir Arnold accepted the offer made to him by the University of London that he should deliver certain special lectures here, and it was a great privilege for the Royal Veterinary College when he offered to complete his wonderful researches into rickets, osteomalacia, and the osteodystrophic diseases of bone in our laboratories, and that he allowed these results to be published in an English paper—the 'Veterinary Journal.' He was indeed a most inspiring teacher, and the results of his work (as his biographer has stated) vindicated research in general 'by showing that liberal support of scientific investigation is a business proposition.' His modest, charming, and genial manner endeared him to every member of the profession with whom he came in contact, and the animals have not only lost a true friend but the whole world is the poorer for his loss."

Sir Merrik Burrell, president of the Royal Agricultural Society of England, writes:—

"Everyone interested in veterinary science will regret deeply the death of Sir Arnold Theiler. Evidence that his great work in combating disease was fully appreciated by agriculturists in this country as well as in South Africa can be found in the fact that in 1934 the Royal Agricultural Society of England presented Sir Arnold with its gold medal, which is given for distinguished service to agriculture. General Smuts undertook himself to hand the medal to Sir Arnold on behalf of the society at a great gathering of South African farmers. The whole world is the poorer by the loss of such a man."

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HORSE TRAFFIC IN LONDON

New Restrictions

On Friday of last week the Minister of Transport, Mr. Hore-Belisha, gave notice in the *London Gazette* of his intention to make regulations restricting the use of certain streets in Westminster and Holborn by slow-moving traffic, including horse-drawn vehicles, where congestion is caused by such traffic.

The regulations will be similar to those which have contributed to the improvement of traffic conditions in Oxford Street, and will operate between noon and 7 p.m. on weekdays, except Saturdays, and between noon and 3 p.m. on Saturdays.

During these periods vehicles drawn by horses or other animals, or drawn or propelled by hand, will be prohibited from using any scheduled street unless the vehicle is proceeding to or from premises within that scheduled street, or to or from premises in any other street to which there is no access for such vehicle except by way of that scheduled street.

The scheduled streets referred to are, in the City of Westminster: Regent Street (south of Princes Street), Haymarket, New Bond Street (from Blenheim Street to Old Bond Street), and Old Bond Street, and in the Borough of Holborn: New Oxford Street and High Holborn.

Any person acting in contravention of the regulations will be liable on summary conviction to a fine not exceeding £5. Vehicles belonging to a local authority being used for tending the surface of a street are exempt.

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UNIVERSITY OF LONDON EXAMINATIONS IN VETERINARY SCIENCE

Following is the July, 1936, Pass List issued in connection with the examinations in Veterinary Science held by the University of London: First Examination (for external students): Peters, Ernest Gerald Eardley (St. Lawrence College, Ramsgate) and Purkis, Barbara Mary (Royal Naval School, Twickenham); *First Examination* (for internal students): Harries, Leslie Gwyn, and Salmon, Stella Margery (Royal Veterinary College and Birkbeck College); Second Examination (*Part II*) (for internal and external students): Barnett, Stephen Frank; Francis, John; Lee, John Arthur, and Roach, Robert Weller, all of the Royal Veterinary College.

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LEGAL NOTES

Meaning of "Milch Cow"—The question "What is a milch cow?" was asked in the Westminster County Court, on August 6th, when Mr. Benjamin Joseph Mellor, The Farm, Thornton, Leicestershire, was sued by the Milk Marketing Board for £9 14s. 6d. levies under the scheme.

Mr. Mellor raised the defence that though he had five cows for brief periods, one cow was not producing milk at the time, and therefore he was entitled to continue on the four-cow basis at a figure not exceeding £2 per annum (10s. per cow), whereas he had been assessed on gallonage basis as being the possessor of more than four milch cows.

Mr. S. J. Leach, representing the Board, said that Mr. Mellor had not tried to be obstructive, but simply wished to have a ruling on the point. Mr. Mellor had written that the only dictionary definition he could find was that "milch" meant "giving milk." Under the scheme "milch cow" meant a cow kept for milking purposes, whether dry or in milk.

Mr. W. R. Perkins, for Mr. Mellor, pointed out that the scheme stated that "milch cow" did not mean a heifer which had never calved. Mr. Mellor made the mistake of returning five milch cows when really there were never more than four milking cows. Two were dry. One was a heifer in calf, which he sold and never milked at all.

Mr. Leach said that a milch cow must be dry for a short period, but it was still a milch cow.

Judge Dumas.—It is a very awkward thing that you supply printed forms to be filled up which include the words "dairy cow." Those words do not appear in the scheme, but the words "milch cow" appear in it. It beats me why on earth a different term was used.

Mr. Leach.—I can't say why, except that "dairy cow" implies a cow kept for dairying or milking purposes—a cow kept for the production of milk. The scheme does not say "producing milk for the purpose of being sold." It is entirely up to the farmer whether he retails it, sells it wholesale, feeds it to stock, or throws it away.

After Mr. Mellor had given evidence, Judge Dumas found that during the six months in question Mr. Mellor never had more than four milch cows, because the fifth was a heifer which had never been in calf.

"It might very well be that the proper way of reading the clause is that it means all cows kept for milking purposes provided that they have calved," added Judge Dumas, "but I do not think it necessary for the purpose of this argument to decide it. In the return Mr. Mellor was called upon to make he was not asked to say how many milch cows, but how many dairy cows he had. I think Mr. Mellor can be excused for describing this heifer which had never had a calf as a dairy cow, though he would not have been excused if he had described it as a milch cow."

Giving judgment for Mr. Mellor, with costs, Judge Dumas said that he would not be surprised if the result of this case was an amendment of the wording of the return. "I have done the best I can," he concluded, "but it is very difficult. I dare say it will be the last case of the kind."

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Warble-Fly Order Prosecutions.—Prosecutions for contravention of the provisions of the Warble-Fly Order, which came into operation on March 31st, are now coming to notice. In one of these in which a Devon farmer was summoned for failing to treat cattle, Mr. D. S. Barbour, county veterinary officer, said that at Honiton Cattle Market on June 6th, he saw a heifer owned by defendant which had at least eight swellings on its body due to the warble-fly. The animal had not been properly attended. Defendant said he attended to the animal a fortnight before, and had used a warble-fly dressing. The case was dismissed on the payment of costs, amounting to 4s.

In another case, heard at the same court, and in which the defendant pleaded "Guilty," Mr. Barbour said there were two animals in this case, one with eleven marks and the other with at least eight. Defendant said he was not aware the order was compulsory, or he would have dressed the animals. The Bench fined defendant 5s. and ordered him to pay 4s. costs.

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VETERINARY INSPECTION IN PERTH AND COUNTY

Representatives of Perth Town Council are to discuss with the County Council the possibility of coming to a arrangement in regard to the appointment of a whole-time veterinary inspector. A letter on the subject was read from the County Clerk to a meeting of the Public Health Committee, when it was agreed that a remit should be made to the magistrates and convener of the committee to discuss the position with the County Council, who suggested that the town should join with them in the matter.

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CLOSURE OF WINDSOR ROYAL STABLES

It is announced that the Royal Stables at Windsor Castle are to be closed and that the horses will be transferred to the Royal Mews at Buckingham Palace. A small maintenance party

will be retained at the Royal Mews, Windsor Castle, so that the stables will be available when required.

The Windsor correspondent of *The Times* writes: "The change will affect few persons in Windsor, for of recent years few animals other than the famous Windsor Greys have been kept at the Windsor Mews. It has been the custom to take the Windsor Greys to London whenever they have been needed for State ceremonies, and they have been brought back to the Castle Mews afterwards. Now they will be kept permanently in stables at Buckingham Palace and brought down to their old quarters at Windsor when needed. Many of the employees are retiring on pension. A small number of men will be kept on at Windsor, but most of those who are remaining in service will be transferred to Buckingham Palace. The carriages, including those used for the Royal drive during Ascot week, will remain at Windsor.

"Before motor-cars took the place of horses a large number were kept at the Royal Mews. In the days of Queen Victoria, when the Court was at Windsor for many months of each year, the stables were full. That was before the days of the Windsor Greys, the Hanover Creams then being used for ceremonial occasions. The present buildings are a little less than a century old. When in the reign of George IV extensive alterations were planned at the Castle, Sir Jeffry Wyatville drew up plans for Royal stables to cost £100,000, but they were not carried through. After Queen Victoria came to the Throne, Sir Jeffry drew fresh plans, and in 1839 an Act of Parliament was passed authorising the application of £70,000 out of the land revenue of the Crown for the erection of the necessary buildings."

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POLICE HORSE WITH WIRELESS: LANCASHIRE EXPERIMENT

Sammy, a horse owned by the Lancashire Constabulary, is to be the first in the country to be equipped with a wireless receiving and transmitting set, to be used for traffic control work.

The whole equipment does not weigh more than six lb., including the aerial, and the rider will be able to maintain touch with police headquarters up to a distance of about three miles. It is proposed that the horse and its rider will be posted on busy roads and will receive instructions direct.

The set has its own distinctive call sign—G.T.L. 9—and if the experiment is successful, other horses in Lancashire will be equipped with wireless. The Lancashire force, which claims to be the first to have made use of wireless in its activities, already possesses the only two-way telephone wireless system on motor cars in this country, and it is hoped in the near future to equip the majority of its police cars with similar installations.

The Chief Constable, Captain A. F. Hordern, has also decided to establish a department to receive ideas from the men, and at the end of twelve months the man who has submitted the best suggestion will receive a special prize.

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LIVESTOCK IN ENGLAND AND WALES

The Ministry of Agriculture's report on the acreage of crops and the number of livestock in England and Wales, published on Thursday of last week, states that the total area used for agriculture in England and Wales on June 4th, 1936, was 30,300,000 acres, a reduction of 76,600 acres compared with the total for 1935.

With the exception of sheep, which increased in number by 153,500, or 0·9 per cent., all classes of livestock were fewer in June this year than at the corresponding time in 1935. Cattle showed a decrease of 7,100, or 0·1 per cent.; pigs declined by 12,300, or 0·3 per cent.; and horses on agricultural holdings by 9,200, or 1·1 per cent.

As in 1935, a further reduction in the number of cattle has to be recorded this year, the total number (6,533,900) being slightly smaller than the total number in June, 1935. Cows in calf, heifers in calf, and cattle under one year old have all increased in number, but the other categories are responsible for decreases of greater amount. The most pronounced decrease is among cattle between one and two years old. Dairy stock has increased since June, 1935, by nearly 22,000 animals, or 0·7 per cent., but other cattle have diminished by approximately 29,000 head, or 0·8 per cent. The total number of sheep is 16,630,500, compared with 16,477,000 in June, 1935—an increase of 153,500.

Pigs, which in June, 1935, were considerably greater in number than in the previous year, show this year a small decrease of 12,300.

The total number of horses on agricultural holdings shows a further decrease this year, largely as a result of a decline in the number of horses used for agricultural purposes. The decrease in the total number of horses on agricultural holdings and in horses used for agricultural purposes is general throughout the country.

The reduction in the numbers of fowls amounts to 884,000, or 1·5 per cent. Geese show a decline of 2·5 per cent., or 16,000 birds. Ducks and turkeys are responsible for larger numbers than in 1935, ducks having increased from 2,487,000 to 2,588,000—a gain of 101,000, or 4·1 per cent.—while turkeys number 734,000, against 684,000, an increase of 50,000, or 7·3 per cent.

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COWS AND SHEEP KILLED BY SHELLS

A report was received at Devizes, on August 7th, of the explosion of two shells amid a herd of cattle at Redhorn Hill, on Salisbury Plain. Farm workers hurriedly unhitched their ploughing teams and fled on hearing the explosions, and it was found later that two cows and two sheep had been killed outright. Seven others were badly injured and had to be slaughtered. The shells, which are believed to have been fired by Territorials on the Plain, fell outside the War Office barrier, more than a mile from the nearest target and near a track much favoured by the public for rambles. An enquiry has been ordered.

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COLONEL LINDBERGH'S "ROBOT HEART"

The fourth International Congress of Experimental Cytology, which was opened on August 10th, by Dr. Albert Fisch, included about 20 British men of science among the congress members, who attended from all over the world. Special interest attached to a demonstration of the apparatus devised by Professor Carrel and Colonel Lindbergh for the permanent transfer of isolated living organs. The famous airman has installed the apparatus in the Biological Institute of the Carlsberg Foundation, to which institute Colonel Lindbergh has made a present of his so-called "robot heart."

Correspondence

Letters to the Editor should reach the Office not later than by the first post on Tuesday morning for insertion in following Saturday's issue.

All correspondence must bear the name and address of the contributor for publication.

The views expressed in letters addressed to the Editor represent the personal view of the writer only and must not be taken as expressing the opinion or having received the approval of the N.V.M.A.

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LADY HOBDAY'S ACCIDENT

To the Editor of the Veterinary Record

Sir,—I shall esteem it a favour if you will kindly allow me space in your columns to express my deepest gratitude to you and the many friends in the profession who have so kindly expressed sympathy to my wife and myself during the prolonged illness which has ensued as the result of her terrible accident.

Although she is not yet "out of the wood" the surgeons are at last able to assert that there is now definite and hopeful progress—although it is feared that it will be a long time (even if it does eventually occur) before one can hope for complete recovery.

Yours sincerely,
Frederick Hobday.

Royal Veterinary College,
N.W.1. *August 9th*, 1936.

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THE VETERINARY BENEVOLENT AND MUTUAL DEFENCE SOCIETY

To the Editor of the Veterinary Record

Sir,—I note to-day's issue reports my unpleasant experience of last month, and the help I received from the Veterinary Benevolent and Mutual Defence Society.

This was given in such unstinted measure that I feel I must, with your permission, seize the opportunity you have given me of openly expressing my gratitude to them, to Mr. W. Woods (who paid me no fewer than three personal visits) and to those other veterinary surgeons who attended the Court, in order, if necessary, to give evidence.

The Register of Veterinary Surgeons contains somewhere about 3,500 names; it is a marvel to me that the Register of the V.B. and M.D.S. does not contain the same number.

Yours faithfully,
Warwick Fowle.

25, Oxton Road,
Birkenhead. *August 8th*, 1936.

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"SOUND IN WIND AND EYES—A GOOD HUNTER"

To the Editor of the Veterinary Record

Sir,—With reference to Mr. Cochrane-Dyet's letter on the above subject, in which he states that he finds "hunters with heart disease of varying degrees which is of quite long standing," it would be very interesting and instructive to the profession if Mr. Cochrane-Dyet would be willing to read a paper on the subject giving further details, *e.g.*:—

I. What are the various diseases which he finds?

II. How does he know the length of time the disease has existed?

III. Has he been able to keep in touch with the animals he has diagnosed as suffering from heart disease?

IV. If so, what work are they now performing?

V. If condemned to death, in how many has he found, on making a *post-mortem*, that his diagnosis was proved to be correct?

Yours faithfully,
Graham Rees-Mogg.

42, Princes Gate,
S.W.7. *August 6th*, 1936.

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A POINT WHICH MAY BE OF INTEREST TO ANATOMISTS

To the Editor of the Veterinary Record

Sir,—I have found when examining the uterus of cows through the rectum that in the bowel, about twelve to fifteen inches from the anus, there is a point where there is a band of muscle, about two inches wide, which acts as a definite sphincter. This sphincter action is rather more easily overcome than that of the sphincter of the anus and I have found the sphincter action in 75 per cent. of examinations.

Yours truly,
Woodbridge, Suffolk. T. G. Heatley.

Diseases of Animals Acts
SUMMARY OF RETURNS

Period.	Anthrax.		Foot-and-Mouth Disease.		Parasitic§ Mange.		Sheep Scab.	Swine Fever.	
	Outbreaks confirmed.	Animals attacked.	Outbreaks confirmed.	Animals slaughtered as diseased or exposed to infection.	Outbreaks reported by the Local Authorities.	Animals attacked.	Outbreaks confirmed.	Outbreaks confirmed.	Swine slaughtered.
	No.	No.	No.	No.	No.	No.	No.	No.	No.
Period 16th to 31st July, 1936	17	22	—	—	4	7	2	84	75
Corresponding period in									
1935	6	9	—	—	2	2	8	96	66
1934	8	16	—	—	1	1	6	84	70
1933	10	10	—	—	2	3	4	54	42
Total 1st January to 31st July, 1936	288	341	4	379	77	217	147	1,232	889
Corresponding period in									
1935	225	260	34	10,208	79	164	206	1,182	682
1934	232	255	2	93	92	153	352	974	617
1933	173	194	56	5,350	102	178	212	938	561

Note.—The figures for the current year are approximate only.

§ Excluding outbreaks in Army Horses.